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PTC/SB/05 (11-00)
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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No. 00-340

First Inventor Yenny V.R. Gonzalez et al.
POLYMER=ENHANCED FOAMABLE DRILLING FLUID

I I MINOIMI I ML	Title			
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	EL39433	6769US	111
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Bo	sistent Cor x Patent A ashington,		4
1. X Fee Transmittal Form (e.g., PTO/SB/17) Cutative or ciphel and a digitate for the processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. XX Specification [Total Pages 21] [preferred entangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 2]	7. CD-ROM or CD-R Computer Program 8. Nucleotide and/or Amino. (if applicable, all necessa a. Computer Reada b. Specification Sequenc i. CD-ROM ii. paper c. Statements verifi ACCOMPANYING 9. XX Assignment Pape 37 CFR 3.73(b) S (when there is an 11. English Translation	In duplication (Appendication (Appen	te, large table or (x) ence Submission CRF) n: 2 copies); or y of above copies CATION PARTS heet & document(s) Power of Attorney ant (if epolicable) Copies of i)
5. Oath or Declaration [Total Pages 7] Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Application Data Sheet. See 37 CFR 1.76 B. If a CONTINUING APPLICATION, check appropriate box, and support in an Application Data Sheet under 37 CFR 1.76:	13. Preliminary Amei 14. XX Return Receipt F (Should be special 15. Certified Copy of (foreign priority 16. Request and Cer (b)(2(B)(I). Applie or its equivalent. 17. Other:	ndment lostcard (M lostly itemi Priority De Is claimed tification usant must a	tzed) pcument(s)) nder 35 U.S.C. 122 attach form PTO/SB	
Continuation Divisional Continuation-in-part (CIP) Prior application Information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the Box 5b, is considered a part of the disclosure of the accompanying continu. The Incorporation can only be relied upon when a portion has been inadverted.	ation or divisional application and tantly omitted from the submitted a	is baraby in	corporated by refere	ider ice.
19. CORRESPONDE	NCE ADDRESS			
Customer Number of Ber Code Label	~ X	Сотвероп	dence eddress below	
Name GREGORY P LAPOINTE				
BACHMAN & LaPOINTE, P.C.				
Address 900 Chapel Street, Suite	1201			
City New Haven	State e	Zip C	ode 06510-2	802
2 de la constant de l	Фоле 203-777-6628	Fa	1 00310-2	
Name (Print/Type) CREGORY P. LAPOINTE	Registration No. (Attorne	y/Agent)	28,395	$\overline{\gamma}$
Signature Lengt Col	4	Date	8-28-01	丁

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Approved for use through 10/31/2002. OMB 0651-0032
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FEE TRANSMITTAL for FY 2001

Petent fees are subject to annual revision.

TOTAL AUGUST OF PAYMENT

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Complete if Known		
Application Number		_
Filing Date		
First Named Inventor	Yenny V.R. Gonzalez et al.	
Examiner Name		
Group Art Unit		

TOTAL AMOUNT OF TAXABLE TOTAL	OTAL AMOUNT OF PATMENT (0) 700			
METHOD OF PAYMENT	D OF PAYMENT FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
1. 化A Xnxixxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	Large	Small Eniky		
Deposit Account 02-0184	Entity	Fee Fee Description	Fee Paid	
Number	ode (\$) Code	(8)		
Deposit Account BACHMAN & LAPOINTE, P.C.	05 130 205	65 Surcharge - late filling fee or oath		
Name	27 50 227	25 Surcharge - late provisional filing fee or cover sheet		
Charge Any Additional Fee Required Under 37 CFR 1.18 and 1.17	•			
Applicant claims small entity status.	•• •••	130 Non-English specification		
See 37 CFR(1.27	47 2,520 147 2	· · · · · · · · · · · · · · · · · · ·		
2. Payment Enclosed:	12 920° 112	920° Requesting publication of SIR prior to Examiner action		
Ky Check Credit card Order Caner	13 1,840* 113	1,840° Requesting publication of SIR after Examiner action		
FEE CALCULATION	15 110 215	55 Extension for reply within first month		
1. BASIC FILING FEE	18 390 216	195 Extension for reply within second month		
Exrge Entity Small Entity Fig. Fee Fee Fee Description	117 890 217	445 Extension for reply within third month		
Code (5) Code (5)	118 1,390 218	695 Extension for reply within fourth month		
101 710 201 355 Utility filling fee 710 110 110 110 110 110 110 110 110 110	128 1,890 228 5	945 Extension for reply within fifth month		
land the same of t	119 310 219	155 Notice of Appeal		
	120 310 220	155 Filing a brief in support of an appeal		
	121 270 221	•		
	138 1,510 138 1			
SUBTOTAL (1) (\$) 710	140 110 240	55 Petition to revive - unavoidable		
2. EXTRA CLAIM FEES	141 1,240 241			
Extra Claims below Fee Paid	142 1,240 242			
Total Claims 21 -20** = 1 × 18 = 18	143 440 243			
Independent 2 -3** 0 × 0 = 0	144 600 244			
Multiple Dependent 0 = 0	122 130 122			
Large Entity Small Entity	123 130 123			
Fee Fee Fee Fee Fee Description				
Code (5) Code (5) 103 · 18 · 203 · 9 Claims in excess of 20	581 40 581	 Recording each patent assignment per property (times number of properties) 	_40	
102 80 202 40 Independent claims in excess of 3	146 710 246	355 Filing a aubmission after final rejection (37 CFR § 1.129(a))		
104 270 204 135 Multiple dependent claim, if not paid	149 710 249	355 For each additional invention to be		
109 80 209 40 ** Reissue Independent claims over original patent	, ,,, .,,	examined (37 CFR § 1.129(b))		
110 18 210 9 •• Relastie claims in excess of 20	179 710 279	355 Request for Continued Examination (RCE)		
and over original patent	169 900 169	900 Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 18	Other fee (specify)			
°or number previously paid, if greater, For Raissues, see above	Reduced by Bank	IGEILING Fee Pald SUBTOTAL (3) (\$) 40		

SUBMITTED BY			<u> </u>	Complete (#	applicable)
Name (Print/Type)	CDFCORY D	LADIANTE /	Régistration No. 28,395	Telephone	203-777-6628
Signature	Tu.	7 7 7 4		Dale	8-28-01

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August 28, 2001

Janice T. Statoff

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